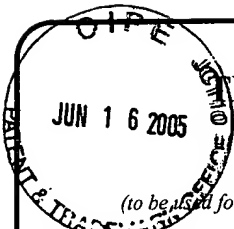
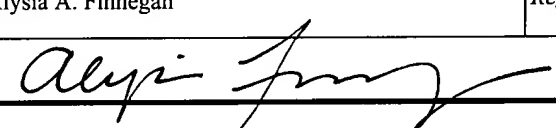
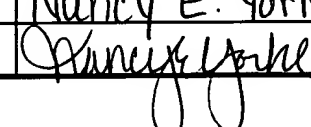


1648

 <b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	<b>Application Number</b>	09/857,917	
	<b>Filing Date</b>	June 11, 2001	
	<b>First Named Inventor</b>	Jansen, et al.	
	<b>Art Unit</b>	1648	
	<b>Examiner Name</b>	Scheiner	
<b>Total Number of Pages in This Submission</b>	10	<b>Attorney Docket Number</b>	20342P

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please Identify below):
<b>Remarks</b>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT				
<b>Name</b>	Alysia A. Finnegan	<b>Registration No. (Attorney/Agent)</b>	48,878	
<b>Signature</b>			<b>Date</b>	6/14/2005

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on this date: <u>June 14, 2005</u>			
<b>Typed or printed name</b>	Nancy E. Yorke		
<b>Signature</b>		<b>Date</b>	June 14, 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

In re application of: JANSEN, ET AL.

Serial No. 09/857,917

Filed June 11, 2001

Group Art Unit 1648

Examiner Scheiner

For: NEUTRALIZING ASSAY USING HUMAN PAPILLOMAVIRUS  
VIRUS-LIKE PARTICLES



Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

☐ The fee has been calculated as shown below.

CLAIMS AS AMENDED

(1)	(2) Claims remaining after amendment	(3)	(4) Highest Number Previously Paid For	(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims	* <u>12</u>	-	** <u>20</u> =	<u>0</u> X	\$50	= <u>0.00</u>
Independent Claims	* <u>3</u>	-	*** <u>3</u> =	<u>0</u> X	\$200	= <u>0.00</u>
Multiple Dependent Claims					\$360 ****	= <u>        </u>
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						0.00

\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space.

\*\*\*\* Add this fee only if application is amended to include multiple dependent claims (regardless of number) and no multiple dependent claims were originally filed.

Charge \$ 0.00 to Deposit Account No. 13-2755. Please charge any additional fees or credit overpayment to Deposit Account No. 13-2755. A duplicate copy of this sheet is enclosed.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on the date appearing below.

By MERCK & CO., INC.

By [Signature] Date June 14, 2005

Respectfully,

[Signature]  
By: Alysia A. Finnegan

Attorney          for Applicant(s)

Reg. No. 48,878

MERCK & CO., INC.  
Patent Dept., RY60-30  
P.O. Box 2000  
Rahway, N.J. 07065-0907

(732) 594-2583

Date: June 14, 2005

IN DUPLICATE

CERTIFICATE OF MAILING

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Commissioner of Patents and Trademarks, Washington, D.C. 20231.

Name

Nancy E. Yorke

Signature

Nancy E. Yorke

Date

June 14, 2005

PATENT

JUN 16 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Jansen, K. et al.

Serial No.: 09/857,917

Case No.: 20342P

Art Unit:

1648

Filed: June 11, 2001

Examiner:

Scheiner, L.

For: NEUTRALIZING ASSAY USING HUMAN  
PAPILLOMAVIRUS VIRUS-LIKE PARTICLES

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313

AMENDMENT UNDER 37 C.F.R. §1.111

Sir:

This communication is in response to the outstanding Office Action mailed March 18, 2005, in the above-identified application, having a three-month period for response set to expire Monday, June 20, 2005. Applicants respectfully request the following amendments be entered and the claims considered in light thereof. Please credit any overpayment or charge any fee deficiency to Deposit Account No. 13-2755.

**AMENDMENTS TO THE CLAIMS** are reflected in the listing of claims which begins on page 2 of this paper.

**REMARKS** begin on page 4 of this paper.